

OPEN ENROLLMENT DATES:

August 1 – 20, 2021 BCBS Health/Dental & Ameritas-VSP Vision
August 1 – 31, 2021 ASI Flex Spending

NOTE: ENROLLMENT FORMS ARE DUE IN HR BY CLOSE OF BUSINESS ON ABOVE DATES.

Go to *Firefly Employee Self Service* for details on your current benefit elections.

BLUE CROSS/BLUE SHIELD: <u>OPEN ENROLLMENT DATES ARE AUGUST 1-20, 2021.</u>

CHANGES INCLUDE:

- Premiums will increase in August 2021 payroll: 3.06% Health and 0% Dental (see tables below)
- Office Visit for Mental Health and Substance Abuse will be covered at 100% for the PPO plans.
- > To make changes to your health/dental insurance, complete an enrollment form and return to HR prior to close of business on August 20, 2021. If you have no changes, no action is needed.

Health Plan Options:

\$650 Deductible Standard PPO Plan includes copays prior to meeting deductible.
Benefits Summary: https://www.ehaplan.org/sites/default/files/educators_health_alliance_650_09-01-2021.pdf

Health \$650 PPO	Employee Cost/Month	NSCS Cost/Month
Employee	\$111.54	\$632.04
Employee/Spouse	\$390.38	\$1,171.14
Employee/Child(ren)	\$343.91	\$1,031.73
Employee/Family	\$524.18	\$1,572.54

\$3600 Deductible with HRA – HDHP (High Deductible Health Plan) includes monthly employer contribution to HRA (Health Reimbursement Arrangement) plan: \$62.50/month for Employee Plan or \$125/month for All Other Plans. This plan does not offer any medical or prescription copays. Copays and Coinsurance apply only after the deductible has been met.

Benefits Summary: https://www.ehaplan.org/sites/default/files/educators_health_alliance_3600_hsa_09-01-2021.pdf

Health \$3600 HDHP	Employee Cost/Month	NSCS Cost/Month
Employee	\$89.23	505.63
Employee/Spouse	\$312.31	\$936.92
Employee/Child(ren)	\$275.13	\$825.40
Employee/Family	\$419.35	\$1,258.04

Dental Plan: https://www.ehaplan.org/sites/default/files/educators_health_alliance_dental_option_5_non-std_09-01-2014

- The Dental Plan (Option 5) includes two oral exams/cleanings each calendar year with no deductible.
- Maintenance and Restorative services require a \$25 deductible for individual (\$50 family).
- Orthodontic services are not covered.

Dental	Employee Cost/Month	NSCS Cost/Month
Employee	\$ 8.70	\$ 49.31
Employee/Spouse	\$ 30.46	\$ 91.39
Employee/Child(ren)	\$ 26.83	\$ 80.50
Employee/Family	\$ 40.91	\$ 122.73

NOTE: Participation requires election of both health and dental coverage.



AMERITAS-VSP VISION INSURANCE

OPEN ENROLLMENT DATES ARE AUGUST 1-20, 2021.

- ➤ Effective September 1, 2021, Ameritas-VSP will be the new provider for vision insurance (see highlight sheet for coverage details).
- New ID cards will be issued.
- > Premiums will increase in August 2021 payroll (see the table below).
- Frame and contact allowances will increase to \$150 and Deductible to \$20.
- If you are already enrolled in Vision and want to continue coverage, no action is needed.
- If you want to enroll or make changes to coverage, complete an enrollment form and return to HR prior to close of business on August 20, 2021.

Vision	Employee Cost/Month	NSCS Cost/Month
Employee	\$4.08	\$4.08
Employee/Spouse	\$13.56	\$4.08
Employee/Child(ren)	\$10.16	\$4.08
Employee/Family	\$19.64	\$4.08

ASI FLEXIBLE SPENDING ACCOUNT: OPEN ENROLLMENT DATES ARE AUGUST 1-31, 2021.

- > To participate, employees must re-enroll for the flexible spending account each year.
- Health Care FSA Maximum is \$2,750.
- ➤ Dependent Care FSA Maximum is \$5,000 (if married filing joint or single head of household) or \$2,500 (if married filing separate income tax returns).
- > Over-the-Counter drugs are now reimbursable.
- See attached document for detailed instructions on how to enroll online:
 - o If you are a current participant, go to www.asiflex.com and click "Account Detail" tab
 - If you are <u>not</u> a current participant, go to <u>https://enroll.asiflex.com</u>

<u>BENEFICIARY REMINDER</u> – Please review your beneficiaries on your life insurance and retirement plan to make certain they are current. To make changes, contact HR.